

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
Date Stamp (Received)
SEP 12 2018

Bayfield Co. Zoning Dept.

Permit #:

18-0492

Date:

12-5-18

Amount Paid:

\$75 cash

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER							
Owner's Name: <u>Reed Saam</u>		Mailing Address: <u>PO Box 1455</u>		City/State/Zip: <u>Bayfield WI 54814</u>		Telephone: _____	
Address of Property: <u>31865 State Hwy 13</u>		City/State/Zip: <u>Bayfield WI 54814</u>		Cell Phone: <u>734-649-7701</u>		Plumber Phone: _____	
Contractor: _____		Contractor Phone: _____		Plumber: _____		Plumber Phone: _____	
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone: _____		Agent Mailing Address (include City/State/Zip): _____		Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# <u>37775</u>		Recorded Document: (Showing Ownership) <u>2018R</u> <u>573483</u>	
<u>NE 1/4, NE 1/4</u>		Gov't Lot _____		Lot(s) <u>1</u>		CSM <u>2033</u>	
Section <u>19</u> , Township <u>51</u> N, Range <u>4</u> W		Town of: <u>Russell</u>		Lot Size _____		Acreage <u>4.5</u>	

<input type="checkbox"/> Shoreland →	<input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : <u>100</u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
\$ <u>1000</u>	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>HT</u>	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> POSTS	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	_____	Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	_____
	<input type="checkbox"/> Run a Business on Property	_____	<input type="checkbox"/> Year Round	_____	<input type="checkbox"/> Portable (w/service contract)	_____
	<input type="checkbox"/> _____	_____	<input type="checkbox"/> _____	_____	<input type="checkbox"/> Compost Toilet	_____
<input type="checkbox"/> None						

Existing Structure: (if permit being applied for is relevant to it)	Length: _____	Width: _____	Height: _____
Proposed Construction:	Length: <u>15'</u>	Width: <u>10'</u>	Height: <u>2.5'</u>

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input checked="" type="checkbox"/>	Addition/Alteration (specify) <u>Deck</u>	(10 X 15)	150
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Reed Saam
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 9/12/18

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit PO Box 1455 Bayfield WI 54814

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

- (1) Show Location of: **Proposed Construction**
(2) Show / Indicate: **North (N) on Plot Plan**
(3) Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
(4) Show: **All Existing Structures on your Property**
(5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
(6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
(7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road 71	100 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way 13	41 Feet	Setback from the River, Stream, Creek	150 Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	41 Feet		
Setback from the South Lot Line	598 Feet	Setback from Wetland	52 Feet
Setback from the West Lot Line	156 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	174 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	30 Feet	Setback to Well	50 Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:	Sanitary Date:	
Permit Denied (Date):		Reason for Denial:				
Permit #: 18-0492		Permit Date: 12-5-18				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
Granted by Variance (B.O.A.)			Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:			
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No CSM	Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Stakes	Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: Project site was staked and property recently surveyed. House is non-conforming with ROW set-back of approx 18ft and 78ft to centerline. Deck is on back side of house and doesn't increase non-conformity.					Zoning District (A6.1) Lakes Classification ()	
Date of Inspection: 9/24/18		Inspected by: Todd Norwood			Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.) Must obtain a Uniform Dwelling Code (UDC) permit from the locally contracted UDC inspection agency prior to start of construction, if required. Must meet and maintain set-backs.						
Signature of Inspector: Todd Norwood					Date of Approval: 9/25/18	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>

City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **18-0492** Issued To: **Reed Saam**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **19** Township **51** N. Range **4** W. Town of **Russell**

Gov't Lot Lot **1** Block Subdivision CSM# **2033**

For: **Residential Addition / Alteration: [1 - Story; Deck (10' x 15') = 150 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must obtain a uniform dwelling code permit from the locally contracted UDC inspection agency prior to start of construction if required. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

December 5, 2018

Date